

PATENT APPLICATION DETERMINATION RECORD  
Effective October 1, 2003

Division or Deck: Number:

10/508761

CLAIMS AS FILED - PART I

|                                  | (Column 1)    | (Column 2)               |
|----------------------------------|---------------|--------------------------|
| TOTAL CLAIMS                     |               |                          |
| FOR                              | NUMBER FILED  | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 19 minus 20 = |                          |
| INDEPENDENT CLAIMS               | 4 minus 3 =   | 1                        |
| MULTIPLE DEPENDENT CLAIM PRESENT |               | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

|  | (Column 1)                       | (Column 2)                         | (Column 3)               |
|--|----------------------------------|------------------------------------|--------------------------|
| AMENDMENT A                                    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
| Total  | 18                               | 20                                 |                          |
| Independent                                    | 4                                | 4                                  |                          |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                                    | <input type="checkbox"/> |

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE      | FEE | OR | RATE      | FEE  |
|-----------|-----|----|-----------|------|
| BASIC FEE |     |    | BASIC FEE | 920  |
| XS 9=     |     |    | XS 18=    |      |
| X43=      |     |    | X86=      | 86   |
| +145=     |     |    | +290=     |      |
| TOTAL     |     |    | TOTAL     | 1006 |

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE             | ADDITIONAL FEE | OR | RATE             | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| XS 9=            |                |    | XS 18=           |                |
| X43=             |                |    | X86=             |                |
| +145=            |                |    | +290=            |                |
| TOTAL ADDIT. FEE |                |    | TOTAL ADDIT. FEE |                |

|  | (Column 1)                       | (Column 2)                         | (Column 3)               |
|--|----------------------------------|------------------------------------|--------------------------|
| AMENDMENT B                                    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
| Total  |                                  |                                    |                          |
| Independent                                    |                                  |                                    |                          |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                                    | <input type="checkbox"/> |

| RATE             | ADDITIONAL FEE | OR | RATE             | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| XS 9=            |                |    | XS 18=           |                |
| X43=             |                |    | X86=             |                |
| +145=            |                |    | +290=            |                |
| TOTAL ADDIT. FEE |                |    | TOTAL ADDIT. FEE |                |

|  | (Column 1)                       | (Column 2)                         | (Column 3)               |
|--|----------------------------------|------------------------------------|--------------------------|
| AMENDMENT C                                    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
| Total  |                                  |                                    |                          |
| Independent                                    |                                  |                                    |                          |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                                    | <input type="checkbox"/> |

| RATE             | ADDITIONAL FEE | OR | RATE             | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| XS 9=            |                |    | XS 18=           |                |
| X43=             |                |    | X86=             |                |
| +145=            |                |    | +290=            |                |
| TOTAL ADDIT. FEE |                |    | TOTAL ADDIT. FEE |                |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  
\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  
\* The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.